

• · • · · · · · · · · · · · · · · · · ·	
Building Permit Application	

Date Issued: _____

Job Address	(If Known) _					Permit #	
Subdivision _					Lot#	_Tax Key#	
Owner						Phone	
Address						ZIP Code _	
The Building Premises to				and Permit	Fees		
Class of Con				# of Units		# of Stori	ies
Principal Bld			Acc. Bldg	_		Trans. ID #	
Project:	New Bldg.		Addition		Alteration		Other
Side yard	West			1st Floor		sq. ft.	
•	North		_	2nd Floor		sq. ft.	> Total
•	East		=	Other Floor		sq. ft.	Area =
•	South		=	Garage		sq. ft.	
Front Yard S	_		feet	Foundation		sq. ft.	
Rear Yard S	_		feet	Total Area			Sq. Ft.
Approval Da		Plan Revie				Engineer	
		Planning C				Sanitary	
Architect D-		Board of A				Fire Dept	
Architect, De	-	.rigineer				Phone	
Address						- Dhon-	
General Con							
Address			Corporter			_	
			•				
Hvac			_riumbing_			_Electrical _	
Sprinkler Roof type:			Gable		State Plan	izeviewet	Shed
Electrical Se		& Type	Gable		Hip Heating Eu	al & Tuna	_ JIIEU
Air Condition		, ——	Redrooms		Heating Fu		
	ning Yes Quantity	/ INU	Bedrooms Natural		Bathrooms Mfg. Gas		_ Mfg. Solid
ı ır c pıac c	«uarilly .		_ raculal		wig. Gas		_ iviig. Ooliu
_	Bldg.			Recert		Erosion	
	Review			Fireplace			
	Heat Calcs			Occupancy			
	=						
Estimated Va	alue of Proj	ect.	\$		Total Perm	nit Fee	\$
I horoby a -1	nowlodes "	ant I have	and this se	alication and	state that "	an above to	correct and agree
•	_			plication and urtevant and			s correct and agree vs regulating
	tion of build	lings and to	o observe ar				as provided by
Owner or	Agent X					Date	
Permit Appr	roved By _					Date	